21977	_
21977	2

STATE OF SOUTH CAROLINA RECEIVED

(Caption of Case)

Example: Application for a Class C Charter Certificate from 21 2019

BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

John Doe dba Doe's Limo	39	D A NICDO		AVED CHEEN
Request for reinstatement of Class C Taxi Certifica	ite)		RTATION CO	
Julius Baylock dba J & B Limo-Taxí	, , , , ,		2009 - 2 1994 ₋ 19	
VIIIUS DISTOCK GOA O CE D DIMO-TAXI) NUN	MBER: _	1994 . 19	<u> </u>
Julius Baylock DBA	have a Doo	cket Number.	The Commission w mission before, a D	with the PSC, you will not ill assign one to you. If you ocket Number was assigned
Submitted by: (J. E. B. Limb	Wer Telepho	ne:	843-	76/-6392
Address: 179 DOB's Cornel	Fax:		<u> </u>	
monch Cornel SCI	Other:			
29461	Email:			
NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.				
NATURE OF AC	TION (Check all	that apply)	
Application - Class A/A Restricted		Reque	est for Name Cha	nge on Certificate
Application - Class C Taxi		Reque	est to Amend Sco	pe of Authority
☐ Application - Class C Charter		Reque	est to Amend Tar	iff (rate increase, etc.)
Application - Class C Charter Bus		Reque	est to Amend Pas	senger Limit
Application - Class C Non-Emergency		Reque	st Please	expidite
Application - Class C Stretcher Van	RIVEID	Exhib	it	
Application - Class E Household Goods		Late-F	Filed Exhibit	
Application - Class E Hazardous Waste	7 ; (ii) ¹ ,	Letter		
	SC SC TING DEPT	Propo	sed Order	
Request for Extension to Comply with Order	THAC DEL	Publis	her's Affidavit	
Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded Request for Cancellation of Certificate			vation Letter	
		Respo		
		_	n to Petition	
Request for Suspension		Other	·	
Request for Reinstatement				
If you have any muching about 41 in face of the same o				•••

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

Print Form

Reset Form

CLASS C REINSTATEMENT FORM

File the original with:	Mail or fax a copy to:
Public Service Commission of South Carolina Docketing Department Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 – 5100 FAX (803) 896-5199	S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
DATE: 10-21-09	
Please consider this an application for Reinstatem	ent of my Class C:
(Taxi) Certificate	
Charter Certificate	
Charter Bus Certificate	
Non-Emergency Certificate	
My Certificate of Public Convenience and Necessis	ty No. is <u>(a181-A</u> My certificate was
United separat for 2008. I seek re-certification	because of need this Job
(Name of Company)	BA J&B Limo-Tax1
	(if applicable)
(Street Address)	
(Street Address) Moncks Corned S.C. 2946/ (City, State, Zip Code)	(Mailing Address if different from Street Address) (Signature)
843~ 761-6392 (Telephone Number)	(Title)

ORS Revised 1/29/08

Transportation CARRIER ANNUAL REPORT

CLASS C - TAXI - CHARTER - NON-EMERGENCY
OF

OCT 21 2009

Julius Baylock DBA J& BLimo-Taxit. T. S. S.

Exact Legal Name of Respondent

PSC/ORS Number (leave blank)

FOR THE YEAR ENDED 2008

[] Calendar Year Ending December 31, 2008 [] Fiscal Year Ending ___

